PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

10/576583

| | | CLAIMS A | AS FILED - | | | | | SMALL ENTITY TYPE | | OR | OTHER THAN OR SMALL ENTITY | | |
|---|---|---|----------------|---|---------------|------------------|-----------|---------------------|------------------------|----|----------------------------|------------------------|--|
| U.S. NATIONAL STAGE FEES | | | (Columi | 1 | <u> </u> | Column 2) | 1 | RATE | FEE | 1 | RATE | FEE | |
| BASIC FEE | | | | | | | BASIC FEE | | <u> </u> | ОR | BASIC FEE | 300 | |
| EXAMINATION FEE | | | | | | , | 1 | EXAM. FEE | | | EXAM. FEE | Zcc | |
| SEARCH FEE | | | | | | | 1 | SEARCH FEE | ļ | | SEARCH FEE | 4-00 | |
| FEE FOR EXTRA SPEC. PGS. | | | . minu | minus 100 = | | / 50 = | | X \$ 125 = | | | X \$ 250 = | | |
| TOTAL CHARGEABLE CLAIMS | | | e minus 20 = * | | | | | X \$ 25 = | | OR | X \$ 50 = | | |
| INDEPENDENT CLAIMS | | | minus 3 = * | | | · · · · · · | 1 | X \$ 100 = | | OR | X \$ 200 = | | |
| MUL | TIPLE DEPEN | DENT CLAIM PRI | ESENT | -,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | + \$ 180 = | | OR | + \$ 360 = | | |
| * If | the difference | in column 1 is | less than zero | , enter "0" i | in col | lumn 2 | . | TOTAL | 7.10 | OR | TOTAL | 900 | |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | | | SMALL E | NTITY | OR | OTHER T | | |
| AMENDMENTA | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHES NUMBE PREVIOUS PAID FO | R. SLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | * | Minus | ** | | = | | X \$ 25 = | | OR | X \$ 50 = | | |
| | Independent | * | Minus | *** | | = . | | X \$ 100 = | | OR | X \$ 200 = | | |
| | FIRST PRES | ENTATION OF M | IULTIPLE DEPE | NDENT CL | AİM | | | + \$ 180 = | | OR | + \$ 360 = | | |
| | | | | | | , | | TOTAL ADDIT. FFF | | OR | TOTAL ADDIT. FFF | | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | | | | | | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHES NUMBEI PREVIOUS PAID FO | T R SLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | * | Minus | ** | | = . | | X \$ 25 = | | OR | X \$ 50 = | : | |
| | Independent | * | Minus | *** | | = | | X \$ 100 = | | OR | X \$ 200 = | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | + \$ 180 = | | OR | + \$ 360 = | | |
| | | | | | • | | | TOTAL ADDIT. FFF | | OR | TOTAL ADDIT. FFF | , , | |
| *** | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | |